

PRE-APPEAL BRIEF REQUEST FOR REVIEW		Docket Number (Optional): P98-US	
<u>CERTIFICATE OF E-FILING/TRANSMISSION/MAILING</u> I hereby certify that this correspondence is being transmitted via the Office electronic filing system in accordance with 37 CFR 1.6(a)(4), facsimile transmitted to the USPTO at (571) 273-8300, or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on <u>July 12, 2007</u> . <u>/Erin Cowles/</u> Erin Cowles		Application Number: <div style="text-align: center; border: 1px solid black; padding: 2px;">09/547,561</div>	Filed: <div style="text-align: center; border: 1px solid black; padding: 2px;">April 12, 2000</div>
		First Named Inventor: <div style="text-align: center; border: 1px solid black; padding: 2px;">Mathieu et al.</div>	
		Art Unit: <div style="text-align: center; border: 1px solid black; padding: 2px;">2833</div>	Examiner: <div style="text-align: center; border: 1px solid black; padding: 2px;">Alexander Gilman</div>
<p>Applicant requests review of the final rejection in the above-identified application. No amendments are being filed with this request.</p> <p>This request is being filed with a notice of appeal.</p> <p>The review is requested for the reason(s) stated on the attached sheet(s). Note: No more than five (5) pages may be provided.</p> <p>I am the</p> <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 45%;"> <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. <small>See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)</small> <input checked="" type="checkbox"/> attorney or agent of record. Registration number: <u>39,923</u> <input checked="" type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34: <u>39,923</u> </div> <div style="width: 50%; text-align: right;"> <u>/N. Kenneth Burraston/</u> Signature <u>N. Kenneth Burraston</u> Typed or printed name <u>(801) 426-2106</u> Telephone number <u>July 12, 2007</u> Date </div> </div> <p><small>Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.</small></p>			
<input type="checkbox"/> *Total of <u> </u> form(s) are submitted.			